Bronx Community Health Dashboard: Mental Health

Last Updated: 5/20/2019

See last slide for more information about this project.
All together, mental disorders, substance abuse and self-harm & interpersonal violence account for 17% of disability in the US

Data source: Global Burden of Disease Project, 2017. DALY stands for disability adjusted life year and is a summary measure of population health status that combines data on mortality and morbidity.


Annual cost of depression in the United States (in 2018 dollars)

Source: Montefiore

Data source: Global Burden of Disease Project, 2017. DALY stands for disability adjusted life year and is a summary measure of population health status that combines data on mortality and morbidity.
Current Depression
The Bronx has the highest prevalence of estimated depression and within the Bronx, females, Hispanic and younger (18-24) residents have the highest prevalence.

Data source: New York City Community Health Survey, 2017. Age results are not age-adjusted. *Estimates are unreliable and should be interpreted with caution. Estimated current depression defined as PHQ-9 score ≥10.
Bronx neighborhood with the highest prevalence of estimated depression is South Bronx

Data source: New York City Community Health Survey, 2017

*Estimates are unreliable and should be interpreted with caution. Estimated current depression defined as PHQ-9 score ≥ 10.
Serious psychological distress

Serious psychological distress is determined by responses to six questions regarding feeling sad, nervous, restless, hopeless, that everything is an effort and worthless. This tool is called the Kessler 6 inventory.
Both the Bronx and the rest of NYC have experienced a decline in the prevalence of serious psychological distress.

Data source: New York City Community Health Survey, 2002-2015.

Serious psychological distress does not reflect a specific symptomology, but is useful for understanding trends.
Access to mental health services
Among Bronx adults, Hispanic residents that are depressed are least likely to have received mental health counseling or treatment.
Among Bronx youth, female and older youth are more likely to report receiving counseling in the past 12 months.

<table>
<thead>
<tr>
<th>Grade</th>
<th>Percent of youth receiving counseling for an emotional or personal issue in past 12 months</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bronx</td>
<td>20.4, 18.0, 21.0, 14.8, 15.2, 14.5, 25.7, 22.0, 18.4, 22.1, 11.3, 16.1, 21.4, 21.4, 22.8</td>
</tr>
</tbody>
</table>

Data source: Youth Risk Behavior Survey, 2017
In the Bronx, the percent of youth receiving professional help for a personal problem in the past 12 months has been relatively stable since 2013.

Data source: Youth Risk Behavior Survey, 2013, 2015, 2017
Psychiatric hospitalizations
Bronx has the highest rate of psychiatric hospitalizations

Rate of psychiatric hospitalizations per 100,000 adults

- Bronx: 853
- Brooklyn: 684
- Queens: 513
- Manhattan: 750
- Staten Island: 707

Data source: New York State SPARCS data, 2015 reported in the NYC Community Health Profiles, 2018.
In the Bronx, Morrisania and Crotona has the highest rate of psychiatric hospitalizations.

Data source: New York State SPARCS data, 2015 reported in the NYC Community Health Profiles, 2018.
Suicide attempts among youth
The percent of youth attempting suicide has increased by 62% in the Bronx since 2003.

In the Bronx, suicide attempts are increasing for boys and relatively stable for girls, similar to citywide trends.

In the Bronx, suicide attempts have increased the most for non-Hispanic black youth.

Suicide mortality
For the Bronx and the rest of NYC, the suicide mortality rate has remained stable and much lower than the US overall.

In the Bronx, males and non-Hispanic whites have the highest mortality rates from suicide.

Age-adjusted mortality rate from suicide per 100,000:
- 15-24: 6.1
- 25-34: 7.9
- 35-44: 8.3
- 45-54: 7.1
- 55-64: 8.5
- 65-74: 8.9
- Male: 9.4
- Female: 2.8
- Hispanic: 5.0
- NHB: 4.8
- NHW: 12.5

Nationwide, 50% of suicides are firearm-related.

In the Bronx, the mortality rate from suicide remains higher among males

In the Bronx, the mortality rate from suicide has remained relatively stable among Hispanic and non-Hispanic black residents, but increased among non-Hispanic white residents.

Non-Hispanic white males have higher mortality rates from suicide than Hispanic and non-Hispanic black males

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>15-24</td>
<td>7.0</td>
<td>2.5</td>
</tr>
<tr>
<td>25-34</td>
<td>12.5</td>
<td>2.2</td>
</tr>
<tr>
<td>35-44</td>
<td>13.1</td>
<td>3.1</td>
</tr>
<tr>
<td>45-54</td>
<td>12.4</td>
<td>4.2</td>
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<thead>
<tr>
<th>Group</th>
<th>Male</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Hispanic</td>
<td>7.9</td>
<td>2.2</td>
</tr>
<tr>
<td>NHB</td>
<td>7.7</td>
<td>1.8</td>
</tr>
<tr>
<td>NHW</td>
<td>5.9</td>
<td></td>
</tr>
</tbody>
</table>

The most common mechanism for suicide in the Bronx and the rest of NYC is suffocation, which includes hanging and strangulation.

Data source: Underlying Cause of Death, 2013-2017. Other includes, for example, cut/pierce, fire/flame, hot object/substance, motor vehicle traffic, machinery, other transport, etc.
Among New York State counties, the Bronx has the second lowest suicide mortality rate.

About the Community Health Dashboard Project

- The goal of the project is to provide Bronx-specific data on risk factors and health outcomes with an emphasis on presenting data on trends, socio-demographic differences (e.g., by age, sex, race/ethnicity, etc.) and sub-county/neighborhood level data.

- Will be periodically updated as new data becomes available.

- Produced by Montefiore’s Office of Community & Population Health using publicly-available data sources.

- For more information please contact us at OCPHDept@montefiore.org